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Centre for Health and Social Justice

Centre for Health and Social Justice

12th Annual Report
2016-2017



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Centre for Health and Social Justice

Basement of Young Women's Hostel No.2 (Near Bank of India)

Avenue 21, G Block, Saket, New Delhi - 110 017.

Phone: 91-11-26535203, 26511425 Telefax: 91-11-26536041

Email: chsj@chsj.org, Website: www.chsj.org

Contents: CHSJ Team

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Centre for Health and Social Justice

Overview

CHSJ is now established in the second decade of its life. At one level, in the course of the last decade CHSJ's work moved from a focus at the national level-strengthening knowledge generation, building consensus and influencing policy to a more community based approach. Over the last five years or more we have been able to develop the principles of a nuanced community based approach which links the community to the district, state and national levels.

A decade provides a reasonable time frame to understand the relevance and sustainability of the work that is started by an organization. As an organization based out of the national capital we are often asked whether we work directly with communities, and since we say we don't, the question follows that what is the value added through our approach. Our approach is to strengthen partners at the community level, building their capacities to work more effectively with communities and with individual men to change their attitudes and their actions. In the course of our work we have realized that this process of linking individual change to collective action for change, creates a powerful social impetus that can at the same time challenge embedded gender discriminatory social norms as well as build social solidarities among the marginalised who are now able to better negotiate public service delivery from local functionaries. Our work with district and state level collectives of civil society organisations has helped strengthen state level associations and alliances which are now working more collectively and autonomously, calling upon CHSJ to support them on a need based manner. This enhanced capacity to work either alone or collectively and to engage both with social and public systems within a rights and empowerment framework, has emerged as a unique element of our approach. This builds a model of sustainability for grounded social action for change.

CHSJ is now being seen as a key innovator in the field of men and gender equality, as well as the field of health governance both at the national and at the international level. We have been successfully able to show that field experiences provide a rich source learning not only for other practitioners but for theoretical as well as for policy purposes. This year we received a number of requests from organisations, including women's organisations, who are now seeing that it is necessary to work with men on issues that have traditionally been seen as women's issues eg. domestic violence, maternal health or even women's economic empowerment. A paper was published in a respected international journal drawing theoretical lessons from our work with men and how it is pushing the boundaries on adopting an intersectional approach to power in gender related work. Our director has been invited to join the research advisory committee of an academic institution working on health governance and accountability. We have started receiving invitations from Government agencies to share our approach and lessons related to health governance as well as involving men and boys to improve policy design and practice. This is a sign that our work is relevant to the community as well as the policy arena, and goads us to work harder.



Abhijit Das

Managing Trustee and Director

Acknowledgements

The work of CHSJ is complex. We are trying to link community experiences to the national policy framework and distil globally relevant lessons. At the same time we are trying to support learning processes across the board. This would not be possible without the unstinting support that we have received from a large number of partners and associates, mentors and advisors, funders and supporters as well as the technical and logistic support from vendors and suppliers. The staff of CHSJ owes a deep debt of gratitude to all the members of the communities and to members of our partner organisations who have been instrumental in supporting our work, and in the process become active co-learners as well as mentors. The team at CHSJ, has performed its responsibilities with a great sense of purpose and diligence, and individually and collectively have also been steadfast in their support to other social justice issues in the country.

On behalf of the Board of Trustees and the team at CHSJ I wish to acknowledge the struggles of the marginalized, who through their struggles, not only keep the flames of social justice alive but become beacons of hope and inspiration for all of us.



ORGANISATIONAL PROFILE

The Centre for Health and Social Justice (CHSJ) is a civil society institution working on issues related to health and social justice with a focus on empowering communities. It is a Registered Charitable Trust founded in 2006 with headquarters in New Delhi and field interventions in more than 10 states of India. CHSJ focuses on networking, capacity building, research and evidence based advocacy as primary strategies in its work. CHSJ seeks to strengthen governance and accountability in public health and gender justice through technical support, research, and policy advocacy. Community action for health rights, reproductive and sexual health rights, masculinities and gender form the predominant themes of CHSJ's intervention at present.

MISSION

To strengthen civil society actions towards an equitable, just and inter-dependent society, and accountable and inclusive governance. Through this, both the state as well as society will be enabled to uphold health rights, gender justice, well-being and dignity of all, especially the marginalized and socially excluded communities.

Gender Justice - To support, strengthen and build alliances with civil society and women's movements to engage men and boys for creating a gender just society. Restructure gender relations and establish alternative equitable practices, facilitate public actions and positions against injustice and build social accountability. This will be done through capacity building, creating critical knowledge resources and reflective spaces.

Public Health - To promote health, well-being and dignity of all citizens, especially marginalized and socially excluded communities. This will be done through rigorous, robust, innovative and participatory use of research, capacity building of people's organizations and advocacy for ensuring community participation in health governance and realisation of health rights.

STRATEGIES

Gender Justice

1. Generating and disseminating knowledge on masculinities and effective methodologies for

working with men and boys for gender justice and establishing the equitable social norms.

2. Create and strengthen collectives for working with men and boys for learning, sharing and collective action towards gender justice.
3. Capacity building of network members and partners to create a community of practice for working with men and boys. Developing/making available a resource pool on the issue for various stakeholders.
4. Strengthening partnerships with various groups specially women's movements and LGBTQI for policies and people centric advocacy for gender justice - from local to global.

Public Health

1. Create a shared understanding and partnership with concerned stakeholders (marginalized and socially excluded groups, civil society and practitioners) on critical health rights issues.
2. Equip citizen's groups and practitioners (especially those working with marginalized and excluded communities) with knowledge, perspective and skills, to empower communities for increasing participation in health governance, demanding accountability and negotiating systemic change.
3. Generate knowledge that advances understanding of health rights issues of marginalized and socially excluded communities, strategies to address them, and contributes to affecting change.

THEME: MEN AND GENDER EQUALITY

This year CHSJ brought together its linkages and experiences of over a decade of engaging men in gender justice by launching the national campaign Ek Saath in partnership with diverse groups and networks. With this it reached closer towards its vision of building a nation-wide community of pro-feminist men supporting women's rights. Its work was also recognised through the Vodafone-NASSCOM Mobile for Good (M4G) Award for its innovative Kishor Varta audio stories programme.

EK SAATH NATIONAL CAMPAIGN REACHES THOUSANDS OF GENDER CHAMPIONS

Building upon the momentum of the landmark Second MenEngage Global Symposium held in New Delhi in 2014 and the synergy between the three national level networks Forum to Engage Men (FEM), India Alliance for Gender Justice and One Billion Rising (OBR), the EkSaath national campaign to engage men and boys in changing gender discriminatory social norms was launched this year.

Hundreds of mobilisation events were held under the campaign in six states, reaching 12 lakh people in 2000 rural and urban locations in 100 districts. 200 educational institutions were also covered. Public events like rallies, meetings, pledge taking, gender mela, film screenings, seminars,

media interactions, wall writing and distribution of pamphlets were organised primarily during the 16 Days of Activism period by the campaign's 135 partner organisations.

These activities helped the campaign engage with and identify 5000 potential Samanta Saathi or Partners for Equality who are men and boys keen to have a deeper engagement on gender justice. A robust IT enabled capacity building and communications platform has been developed by the campaign for sustainability and networking among the Saathis. In addition a 'Saathi Campaign Kit' and a wide range of multimedia resources have been put together by the campaign (See 'Resource Centre on Masculinities') Ek Saath State Hubs have been instituted in 10 states and extensive civil society consultations helped identified social norms and plan the campaign.

At the national level the campaign is being guided by a coordination committee with representatives of leading women's groups and others. The Ek Saath national secretariat is hosted by CHSJ.

The Ek Saath campaign was involved in celebrating OBR Day in February in Delhi's Connaught Place. It also participated in an OBR press conference in Delhi with panelists from across the human rights spectrum, which comprised important steps in strengthening its networks and alliances.

COMMUNITY BASED INTERVENTIONS WITH MEN

Supporting Men to Become Responsible Partners and Caring Fathers

Nearly 1000 men and youth in thirty villages in 3 districts of Jharkhand have been organized into groups and sensitised to women's issues



and child rights through the project 'Supporting Men to Become Responsible Partners and Caring Fathers'. Group activities, focus group discussions and others are bringing transformative change in the community. The rapport of group and community members with local service providers and other key stakeholders has strengthened. The community has started taking action on cases of gender based discrimination and violence. (See 'Story of Change')

Hundreds of Yuva Saathis Identified in Work with Adolescents and Young Men in Rural Rajasthan

Community based interventions involving adolescent boys and young men are taking place in 60 villages in Rajasthan's Bundi and Udaipur districts with local partners Manjari and Vikalp respectively. The interventions aim at creating new more equal gender norms by a transformational approach involving men and boys.

920 Yuva Saathi (young partners for change) have been trained and are now recognizing gender discriminatory practices in the family and community and taking actions to enable equal opportunity for girls and boys and stop early marriage.

Kishor Varta Programme: Vodafone-NASSCOM Mobile for Good Award

CHSJ's IVRS (Interactive Voice Response System) based Kishor Varta (Adolescent Conversations) audio stories programme won the 2016 Mobile for Good (M4G) Award for demonstrating innovation in mobile and wireless related technology to address critical social issues. The grant helped CHSJ develop a new audio series dealing with new issues and launch the Kishor Varta programme in new areas of Bundi district with partner Manjari. The programme has helped identify 460 Yuva Saathi through a series of interactive programmes in the project area.

CHSJ has also partnered with ITVS on the Heroes Project Film Academy in Bundi district reaching out to 250 young boys through the programme.

SUPPORTING A WIDER COMMUNITY OF PRACTICE

Capacity Building and Support and Activities of Networks and Partners

CHSJ supported FEM partners to organize Regional Conclaves in North, West, South and North-East regions. The conclaves included

sharing of organisational strategies, challenges and innovations and distilling lessons learnt about masculinities and violence and how to address these.

CHSJ mobilised FEM partners under the Ek Saath campaign during the 16 Days of Activism in November and December. In Jharkhand a massive mobilisation was undertaken by the network's 20 partner organizations in the state with a presence in 200 villages over 13 districts. There was wide media coverage of the issue and its key messages. In addition, FEM District Forums comprising local organisations, academicians, journalists, PRI members and youth have been formed in all 13 districts.

In West Bengal, following interactions and trainings by the state's FEM/Ek Saath network of 15 member organisations, as many as six organisations incorporated the process of work with men into their programmes for securing child rights and gender equality. The state network also conducted the Ek Saath campaign with a variety of mass mobilisation events like gender mela, film screenings, discussions, wall writing and other activities.

MAE (Men's Action for Equity) implemented the Ek Saath campaign in 27 districts of Madhya Pradesh in

Story of CHANGE

"I am sure our group will soon be strong enough to influence villagers on their own against such social practices."

KALINDRA

Initiative to Stop Early Marriage

Communities in Jharkhand where the Responsible Partner and Caring Father programme is being implemented are transforming social norms like early marriage and setting an example for others to take similar actions within their communities.

In Chilindri village in December a nukkadnatak on the evils of child marriage/early marriage had been organized under the Ek Saath campaign by group members. After the event, member Kalindra Singh called for a meeting with the group and shared the information that a 16-year old girl was about to be married off.

Group members visited the girl and boy's families, who were involved in labour work. The families said though they were aware of the implications of early marriage they had already spent money on the arrangements and sent out wedding cards. They added that calling off the wedding would bring shame to them and further, if the couple decided to run away together it would bring greater shame on them. When the panchayat was approached it also felt it was better to stay out of the matter. Facilitator Pankaj Kujoor then visited the girl's parents again along with a few ward members, appealing to them and adding that they could be arrested for the offence of early marriage. The parents then understood the gravity of the situation and agreed to postpone the wedding for two years till their daughter turned 18.

"I am sure our group will soon be strong enough to influence villagers on their own against such social practices," says Kalindra.



partnership with 21 organisations and institutions.

MASVAW Uttarakhand was active in organising the Ek Saath campaign in five districts with 14 partner organisations through 200 mobilisation events.

MenEngage Delhi scaled up its outreach through a massive campaign in March launching the Ek Saath campaign in the capital in collaboration with the Delhi Metro Rail Corporation (DMRC). The network also continued regular interactions with students in Delhi University and other stakeholder groups like members of the Supreme Court Bar Association, boys in a shelter home for juveniles and with students of gender studies and other disciplines from leading universities through its internship programme.

Technical Inputs and Sharing of Practitioner Experiences

The idea of working with men and boys has now emerged as an approach to working on women's rights and many organisations, including women's groups have started approaching us for technical support. Some of these organisations include Jagori, Pradan CREA and OXFAM.

CHSJ and the All Survivor's project

of the UCLA organised a civil society consultation on the issue of sexual violence against boys within institutions like care homes and remand homes in conflict and insurgency-affected states in India. For this, two roundtables were held in December in Delhi and Ranchi with over 30 organisations participating.

Under the Ek Saath campaign one-day training was held in Jagjit Nagar, Himachal Pradesh in January with state partner SUTRA. The participants were 100 boys of 14-16 years age group from different schools in the area. A series of national and state level trainings were held for the Ek Saath campaign's mentors, starting with a three-day National Level TOT 'Understanding Gender Justice and Masculinities' in Delhi in March for 21 trainers from partner organisations in seven states. Subsequently, Ek Saath state level TOTs were held in Jharkhand and West Bengal with 32 and 28 partner organisations respectively.

At the Global Level

Director of CHSJ as Co- Chair of MenEngage Global Alliance attended various meeting related to its governance and strategic plan. CHSJ additional director participated in a two-day international

collaborative workshop 'Exploring New Directions in Gender and Sexuality' organised by the UK based Institute of Development Studies (IDS) in Brighton in June. He participated in a three-day 'Expert Group Meeting on Accelerated Action to End Child Marriage in South Asia' organised by UNFPA in September in Bangkok and was a panelist in a two-day conference held in August in Delhi, 'Engaging Men in Fighting Violence Against Women' organised by the Centre for Social Research.

In April the MenEngage South Asia secretariat was transferred from India to Nepal.

Learning and Exchange

CHSJ promotes and participates in learning exchanges as an important method for building practitioner capacity and to enable peer to peer learning among practitioners. This year a series of practitioner learning initiatives were undertaken for learning both within India and internationally.

In April CHSJ participated in a three-day MenEngage e-dialogue on accountability, an online discussion with participants from 41 countries who came together to share experiences, learnings and challenges in working in the field. MenEngage South Asia collaborated with CHSJ in preparing five case studies documenting best practices on mobilising men and boys for gender justice and preventing violence against women in South Asia. The case studies showcase interventions in Sri Lanka, Nepal, Bangladesh and India carried out by MenEngage partner organisations.

In India, in July CHSJ organised a learning visit of partners from West Bengal, Jharkhand and Uttarakhand to the Samajdar Jodidar programme area in Solapur district of Maharashtra. On World Population Day in July an e-dialogue was organised to discuss the 'The Role of Men in Sexual and Reproductive Health and Rights

in India.’ Interactions were held in July with MenEngage consultant Patrick Welsh who visited Delhi to document models and mobilisation tools used by CHSJ in working with men, coming out with a comprehensive report titled ‘CHSJ’s Theory of Change for Mobilising Men for Gender Justice in Highly Patriarchal Settings.

Visit Resource/Report page of the CHSJ website

RESOURCE CENTRE ON MASCULINITIES AND GENDER JUSTICE

The resource centre supported the activities undertaken by CHSJ by preparing materials across a spectrum of mediums and languages and adapted to different stakeholder groups. One interesting innovation was the partnership with KumaonVani community radio in Nainital District to develop a series of 24 audio stories related to masculinities and gender norms under the programme ‘Apun Radio Apun Baat.’

Other communications innovations are: developing a capacity building curriculum (titled ‘Man Ek Darpan’) for potential Samanta Saathis using online IT based communications, IVRS technology and offline means;

and IVRS training of adolescents through Kishor Varta audio stories enriched with new episodes covering issues of child rights, cyber safety, norms of son-preference etc.

Mobilisation and publicity material for the Ek Saath campaign was developed by the CHSJ Creative Communications team in five languages – Hindi, Bangla, Oriya, Marathi and English. The Ek Saath ‘Campaign Kit’ comprised printed material like sets of posters, stickers, banners, post cards, calendars, pledge sheets, pamphlets, brochures and more, and merchandise like badges, T-shirts, bags and caps. These took forward the key messages of the campaign and its’ Call to Action.

A report was brought out from the countrywide Social Norms Mapping Exercise that had been conducted among partners before the public launch of the Ek Saath campaign. The data was combined with an in depth Desk Review to bring out a comprehensive ‘Report on Literature Review on Social Norms & Social Norm Mapping.’

A case study of the Kishor Varta programme was brought by the MenEngage Alliance in collaboration with CHSJ.

At the South Asia level, in

collaboration with MenEngage South Asia a four week Online Training course ‘Understanding Masculinities – Engaging Men and Boys Towards Gender Equality’ was prepared with inputs from partners who are gender and masculinities experts.

Validation of the global interest in work with men and CHSJ’s efforts to make it visible came with the prestigious publishing house Routledge accepting the volume ‘Global Masculinities: Interrogations and Reconstructions,’ a collection of papers from the Global Symposium written by experts.

Independent documentary film maker Nisha Pahuja has collaborated with CHSJ to film the process of working with men and boys in Jharkhand, continuously documenting the programme being run in the state.

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THEME: HEALTH GOVERNANCE AND ACCOUNTABILITY

SUPPORTING MATERNAL HEALTH RIGHTS CAMPAIGN (MHRC) in MADHYA PRADESH

Maternal Health services for poor and marginalised women continue to be either non-existent or of poor quality in many areas across the country. CHSJ has been working closely with Maternal Health Rights Campaign (MHRC), a state-level civil society women's health advocacy network in Madhya Pradesh. The network, with over 50 civil society organisations across 16 districts strives to ensure that women especially those from the most marginalized communities have access to quality maternal health services. It focuses on the government's accountability for providing free and quality maternal health services. This year, with the support of CHSJ, MHRC adopted a range of strategies for advocating for improved and accessible maternal health services in the state of Madhya Pradesh. A State level maternal health dialogue between civil society and health authorities was held in April 2016 which saw around 100

participants, which included health activists, media representatives and community members from 17 districts. The participants share their experiences with the authorities. It was presided over by the Deputy Director Maternal Health, National Health Mission, Madhya Pradesh. Testimonies highlighting the negligence and apathy of the health care providers leading to the death of women as well as neonates during and following delivery were shared by the relatives of the aggrieved. The Deputy Director assured the gathering of setting up a team for enquiry into the cases that were presented, and assured engagement with civil society in reviewing maternal deaths. At the district level, dialogues were organized in 9 districts (Bhind, Datia, Sheopur, Satna, Sidhi, Rewa, Anuppur, Shahdol and Chhindwara) where the findings of the community inquiry were presented before the concerned officials, representatives from the media, civil society organisations and community, and memoranda were based on the discussions were prepared and submitted to the Chief Medical Health Officer (CMHO).

MHRC also approached quasi-judicial bodies like the State Human Rights Commission, the State Women's Commission and the State SC/ST commission, to file cases of maternal health rights violations and demand remedial action. Since last year MHRC has been working with the media to highlight reproductive health rights violations, and put pressure on the state to take action. CHSJ supported MHRC to sensitise 100 media persons across the state on the maternal health rights issues. As a result there has been an increase of reporting on violations related to maternal health services and family planning services in the district as well as state media.

CHSJ also supported MHRC to nurture local level leadership which would ensure sustainability of the network. A core group of "resource persons" within the MHRC have been trained. A "Health and Social Justice Research Award" was given to 6 awardees from 5 districts to do documentation on different issues, ranging from menstrual hygiene, dalit women's access to services, referral services and so on. In addition, Sterilisation Camp



services were monitored across 35 camps in 11 districts to ascertain the adherence to the Supreme Court guidelines around quality of care. The monitoring revealed a number of violations with respect to the timing of the camp, counselling to the women, provision of information and documentation about compensation, seeking informed consent, which are clear violations of the rights of the women.

SOCIAL AUDIT OF FAMILY PLANNING SERVICES AND MOBILIZING COMMUNITIES TO RAISE AWARENESS AND DEMAND SERVICES IN UTTAR PRADESH

The quality of Family Planning services in India has been under close scrutiny over the years and Supreme Court has on more than one occasion highlighted the importance of maintaining standards. This year CHSJ worked with Sahayog and EngenderHealth, to conduct social audit of Family Planning Services in 5 districts of Uttar Pradesh (Gorakhpur, Maharajganj, Balrampur, Barabanki and SantKabir Nagar), covering 5 Community Health Centres (CHCs). The audit was embedded within Engender Health's existing efforts to strengthen family planning service providers in the state in collaboration with the Government. This exercise was meant to provide feedback around community perspectives on quality and adherence to government guidelines. The project was executed by local CBO partners and took place in two phases. The first round assessment showed that there is a great need for family planning in the community, and there is a gap in awareness of services as well as lack of faith in the system. Women had only been informed about female sterilization and had no information about IUCD, pills or condoms. Men had not been engaged with at all. Further, the assessment also unearthed



incidents of forced insertion of IUCD following childbirth in hospitals which is not only in violation of procedural guidelines, but had also further instilled a sense of suspicion among communities.

During the second phase of the project a demand for family planning services was developed through mobilizing communities and creating awareness of family planning services and entitlements. Men and women, were provided with relevant information regarding methods, advantages and disadvantages in order to enable persons to make an informed choice and strengthening links between the community and facility and building trust between the two. A man and woman from each village were trained as "motivators" and conducted a series of monthly meetings in the villages with men and women's groups, using interactive games that were developed for this purpose. The meetings addressed information gaps about contraceptives, but more importantly they focused on beginning a conversation around gender relations and decision making at the household, son preference and other social norms.

The awareness generation meetings and other interactions were very successful and several couples adopted family planning services which they were unaware about before. Despite the short duration of this intervention, important gains have been made, which suggests

that it fills an important gap in the need for contraception in this rural community in Uttar Pradesh.

MEN WHO CARE - REPOSITIONING FAMILY PLANNING IN MAHARASHTRA

CHSJ believes that 'Men' have a key role in family planning, not only as responsible partners but also as responsible citizens, who work with the functionaries of the state to ensure quality services. The intervention 'Repositioning Family Planning-Men Who Care' with men in Ratnagiri, Osmanabad and Solapur districts caught up momentum due to the campaign activities in the community. In the month of June, 2016, animators from the 3 districts of Osmanabad, Ratnagiri and Solapur were oriented about the various reproductive health issues including maternal health and the concepts of social accountability and how communities can use enquiry processes to make health system accountable for reproductive health entitlements. They carried out the community enquiry process in

Further, the assessment also unearthed incidents of forced insertion of IUCD following childbirth in hospitals which is not only in violation of procedural guidelines, but had also further instilled a sense of suspicion among communities.

their communities to understand the level of service delivery at the health centre level and to increase awareness about services among the community members. One of the block officials shared. “Report cards and the percentage of each service helped us to improve those which were not upto the mark. Due to the public hearing, we got to know about the technical issues like pendency of JSY incentives which we could resolve and women have got their money.”

COALITION BUILDING TO SECURE MATERNAL HEALTH RIGHTS

This year CHSJ took over as the new secretariat for the National Alliance on Maternal Health and Human Rights (NAMHHR) and continued its work on strengthening maternal health rights. A people’s convention was organized which was attended by activists representing 9 constituencies advocating for rights of marginalized communities (see below).

The secretariat is also continuing to advocate for improvement in the reproductive health rights scenario in the country via various media. In September 2016, in response to the Supreme Court of India’s order while hearing the case of

Devika Biswas v Union of India and others (Writ petition (Civil) No.95 of 2012) which directed the Central government to end all mass sterilization camps, a press conference was organized calling for the government of India to immediately implement the Supreme Courts orders and take efforts to stop all camps at the earliest and also anticipated that the media will continue to highlight emerging concerns around the implementation of family planning programs and maintain pressure on the government for greater accountability.

In the arena of global advocacy, this year NAMHHR jointly with CommonHealth, Jan Swasthya Abhiyan and Sahayog, prepared and submitted civil society report on the status of sexual and reproductive health rights in India for the third cycle of the Universal Periodic Review (UPR), which assessed the Government of India’s progress on the recommendations accepted during the presentation of the UPR-2 Report in 2012.

PEOPLE’S CONVENTION ON REPRODUCTIVE HEALTH – FORGING CROSS MOVEMENT ALLIANCES TO ADDRESS REPRODUCTIVE

HEALTH CONCERNS OF THE MOST MARGINALIZED

Building on past experiences of having dialogue with the state and taking the agenda forward a need for greater synergy among groups working at the grassroots level was realized, to generate a nationwide campaign to demand maternal and child health rights. Not limiting ourselves to health rights groups, a wider alliance of political groups (especially those representing marginalized communities, including dalit rights groups, minority rights groups, disability rights groups, groups working on other social rights such as right to food) was aimed to be built so that the agenda of maternal health is owned by all collectively. As a first step towards building such an alliance, a 2-day “People’s Convention was organized on Maternal and Child Health Rights” in Indian Social Institute, Delhi on 16-17 December 2016. This convention brought together organizations and movements from 19 states representing 9 different constituencies (Dalit, Tribal, Muslim, sex workers, single women, youth, LGBTQI, HIV positive women and women in unorganized sector), working on various issues, to amplify voices of their constituencies at the national level and agreed to develop a



common and synergistic agenda for a grassroots campaign in the future. This people's convention was organized by NAMHHR in collaboration with CommonHealth, Wada Na Todo Abhiyan, Jas Swasthya Abhiyan, Scavengers Dignity Forum and Dalit Alliances. This convention was landmark in some way as first time different constituencies other than maternal health groups came together on a platform and made efforts to learn from each other experiences and to explore how maternal health and rights issue is placed in their respective constituencies. The Convention highlighted the need for introspection by the people in the in different movements and to look beyond their constituencies and form alliances with other marginalized groups. There is a need for evidence and document manifestations of discrimination faced by marginalized communities in the public health care system, and need to incorporate an inter-sectionality perspective to understand issues of those marginalized within our constituencies.

STRATEGIC ADVOCACY FOR THE HEALTH RIGHTS OF BEEDI WORKERS IN INDIA

As part of its work on addressing the health rights of marginalized and excluded communities, in this year, CHSJ stepped into examining the health and social welfare concerns of women workers in the beedi industry. The beedi industry is a labour-intensive cottage industry with an estimated 48.12 lakh workers across the country. What used to be a factory based industry earlier has eventually shifted to being home-based and this is one of the reasons why its employees tend to be women. The workers are drawn from the most marginalized and deprived socio-economic strata which has implications for their capacity to make demands both from the industry and the state. Despite the existence of progressive legislation – the Beedi



and Cigar Workers (Conditions of Employment) Act 1966, and the Beedi Workers Welfare Fund Act 1976 - which guarantees benefits and protections to workers, welfare benefits received are marginal. In order to understand the sector better CHSJ undertook a policy and field assessment through systematic research and consultations. During this process, a range of organizations, scholars, union leaders and activists were identified who have made efforts to work with beedi workers towards realizing their rights and to raise and address the health concerns of beedi workers at different levels.

STRENGTHENING GLOBAL LOCAL LINKAGES FOR HEALTH ACTION AND ACCOUNTABILITY

There is an increasing need being felt around the world that without strengthening the practices of social accountability and citizen monitoring it will be difficult to strengthen health systems. CHSJ a founding member of COPASAH (Community of Practitioners on Accountability and Social Action in Health) has been playing its role in this area as the COPASAH Global Secretariat, the South Asia regional hub of practice as well as coordinating the COPASAH Communication Hub. The key activities undertaken by CHSJ in these roles are highlighted below.

Building Alliances with Various Stakeholders and Institutions

As the Global Secretariat of COPASAH we established partnerships and organic relationships with critical partners like the Accountability Research Centre (ARC) at the American University in Washington DC, USA; Health Alliance International at the University of Washington, Seattle USA; Institute of Development Studies (IDS) at Sussex, UK; Transparency and Accountability Initiative, USA; University of Umea, Sweden; and University of Western Cape, South Africa. CHSJ also participated in a Global Consultation on setting the future strategic directions of COPASAH in Vancouver in November 2016 on the sidelines of the Global Health Systems Research Conference.

Strengthening Of Accountability Practice and Influencing Policy Formulation and Implementation through Thematic Hubs

Implementing the new decision to organize thematic hubs CHSJ took on the responsibility of anchoring the COPASAH thematic hub on maternal and reproductive health from January 2017. This thematic hub will stimulate discussion around the role of communities in reproductive health governance with a focus on health and human rights. A core group of experts and practitioners from across the globe have been identified to be a part of this hub.



Deepening of Accountability Practice and Capacity Building

At the regional level in its role of coordinator for South Asia, CHSJ facilitated cross-country learning through a South Asia learning exchange meet in Kathmandu organized in December 2016. A significant outcome of the meet plans for a South Asia region focused COPASAH Communiqué. CHSJ also supported the COPASAH global Secretariat in launching its Social Accountability Dialogue Series

in March 2017 on the theme - Can Social Accountability Strengthen Family Planning Programming? The Dialogue witnessed participation of 21 practitioners from different parts of the world. Continuing its role in enhancing technical capacities of practitioners in the Region, CHSJ supported COPASAH to conduct a training on video making and editing for strengthening local accountability. CHSJ also facilitated short online course on Community Based Monitoring in Health for

practitioners across three states of in India in the local language Hindi.

COPASAH Communiqué

During the year CHSJ supported COPASAH to produce, publish and disseminate four issues of the COPASAH Communiqué. Three issues namely 14th, 15th and 17th editions of the Communiqué mapped the regional diversity in social accountability practices in East and Southern Africa, Central Europe and Latin America respectively.

Story of CHANGE

Reaching out to men was challenging, but fruitful because in many of the districts, men reported adopting condom use

Mobilising Men to be Equal Partners in Family Planning

As a result of group discussions held by men and women in the villages, a greater demand for services has been noted.

In village Gangata of Sant Kabir Nagar, two women who had three children wanted to use contraception but did not have any information on what contraceptives to use and how to use them. During a group meeting, they expressed their need for contraceptive services after which the facilitator in individual counseling sessions, gave them information on the various methods that they could opt for. Both of them decided to opt for oral contraceptive pills. The facilitator then contacted the ANM who provided the women with the pills and explained how to consume them. In Balarampur district in the village of Devipatna, a couple had four children and wanted to adopt family planning. After attending the meetings, they contacted the ASHA and the motivator and decided to opt for an IUCD insertion. They were able to get the procedure done without any problems and did not face any complications after the insertion.

Typically, the family planning outreach does not target men and focuses only on women as potential recipients of contraception. Reaching out to men was challenging, but fruitful because in many of the districts, men reported adopting condom use. In Mohaliya village 3 women reported that their spouses had begun to use condoms after attend village meetings. In village Gherang in SantKabir Nagar, 4 men mentioned that they would like to start using condoms if they were available free of cost. In Barabanki and SantKabir Nagar, men began to obtain condoms from their community health centre and the demand for other contraceptives also rose. Further, In Barabanki, women reported that they could discuss family planning with their spouses because the meeting with men had made it easier for them to have such discussions.

STRATEGIC SUPPORT SERVICES

Research and Information Management are key support functions that allow CHSJ to strengthen its thematic work. Research allows us to understand the impact of government policy and programming as well as the ongoing process/changes that CHSJ tries to bring in through its own interventions. Information management which includes communication is the major thread that runs through our work related to empowerment, knowledge sharing and advocacy.

RESEARCH

The domain of research in CHSJ has been key to generating evidence on gender and health issues, as well as to gather learnings from interventions that the organization is implementing in various states. This evidence has been crucial for advocacy at different levels. In the past year, CHSJ has continued to provide research support especially related to documenting and learning about the changes and challenges in various grassroots interventions around the themes of men and gender equality, and social accountability in the health system.

Mapping the Sustainability of Samajdar Jodidar Programme Intervention Changes

In 2015, CHSJ successfully completed the implementation of the SamajdarJodidar project in Maharashtra which sought to engage men in advancing gender equality. The intervention was implemented in 100 villages across 3 districts of the state. As a follow up to this, various endeavours have been undertaken to distill learnings and outcomes of the intervention. A quantitative endline survey was conducted in the project areas to understand the changes that have taken place among animators and group members in various domains such as contribution to household work, shared decision making, perpetration of violence and so on. Further, to gauge the changes in men's attitudes and behaviour from the women's perspective, specifically in the personal domain of relationship with their wife and other women in family, a qualitative study using in-depth interviews was

carried out in the project areas. The study brought out various domains in which women perceive changes in the men in their households, as well as their own lives as a result of the intervention. It also highlighted the need for such engagement with men to sustain changes for improving women's position in society. CHSJ also commissioned an external evaluation of the SamajdarJodidar programme in collaboration with UNFPA. The evaluation looked at the impact pathways of the programme, their lasting over time, and if the changes the programme has brought about can continue to be sustained without external inputs.

On-going Evaluation of Men and Gender Equality Interventions

In Maharashtra, under the "Repositioning Family Planning- Men Who Care" project the team collected ongoing stories of change and conducted a qualitative endline

review to understand the progress and challenges. Through the study, it could be seen that the last phase was able to re-establish the role of the Aarogya Mitra as a guide and health educator to men and boys on reproductive and sexual health which was recognised as vital in the community. The findings also showed that there was discussion among Aarogya Mitra and their spouse regarding maternal health, sexual health and other reproductive issues; there was increase in use of public health services for SRH and other services; and an established amicable relationship between the health workers and the Aarogya Mitras where discussions and feedback on quality of services was taken positive by health workers and officials.

This year CHSJ spread their intensive work with men in the state of Jharkhand with commencement of a 'Caring Partner and Responsible Father' project which focusses on



men's involvement at care giving. The research team designed and conducted a baseline study to get an overview of the current reality in the area in the domain of gender relations, men's relationships with their partners and children. The findings have been used for informing the planning and implementation in the field.

A research study to document the impact of CHSJ's community interventions on gender with young men and boys in Rajasthan, India was carried out by a student researcher from the University of Washington.

The following is a list of articles and presentations prepared by the CHSJ team during the year.

ARTICLES

Abhijit Das 'Challenge Before the National Health Policy: Rebuilding Trust Between Patients and the Healthcare System'

<http://www.thedialogue.co/challenge-national-health-policy-rebuilding-trust-patients-healthcare-system/>

Abhijit Das 'Healthy, Wealthy and Wise?' The Indian Economist.

<http://theindianeconomist.com/healthy-wealthy-wise/>

Abhijit Das 'What Is It With Men?' The Indian Economist.

<http://theindianeconomist.com/what-is-it-with-men/>

E Premdas Pinto 'A New Year Reminder: India's HIV Bill Does Little To Ensure Access To Treatment'. Scroll January 7th, 2017.

<https://scroll.in/pulse/825978/a-new-year-reminder-indias-hiv-bill-does-little-to-ensure-access-to-treatment>

E Premdas Pinto 'Decoding the Politics of the Supreme Court Judgment on Sterilisation Camps. The Wire, September 23rd 2016.

<https://thewire.in/67590/decoding-politics-sterilisation-judgment/>

Priya John 'Perils of Beedi Rolling: Health of Workers in the Beedi Industry' Medico Friend Circle Bulletin, December 2016 - February 2017, pg 26-28.

<http://www.mfcindia.org/mfcpdfs/MFC373-374.pdf>

WORKING PAPERS

Paper 1: Engendered Accountability for Responsive Health Governance: Intervention with Adivasi Men in Madhya Pradesh (India) for Accountability in Maternal Health

http://www.chsj.org/uploads/1/0/2/1/10215849/engendered_accountability_....pdf

Paper 2: Engaging Men in Family Planning: Experiences from an Intervention in Madhya Pradesh, India

Paper 3: Male Involvement in Maternal Health: An Intervention Research Study from Two Districts in Madhya Pradesh

Paper 4: Community Accountability Processes for Maternal Health Rights

CONFERENCE PRESENTATIONS

E. Premdas Pinto 'Transforming maternal- reproductive health crises into opportunities for accentuating health system resilience by engaging judicial for a' Oral Presentation at the Fourth Global Symposium on Health Systems Research, Vancouver, Canada, November 14th – 18th 2016.

E. Premdas Pinto 'Empowered Citizen vs Profit Powered Health Business: Harnessing Judicial Power to Challenge Health As a 'Commercial Good' Towards Reinforcing Health As a 'Public Good' Poster presentation at the Fourth Global Symposium on Health Systems Research, Vancouver, Canada, November 14th – 18th 2016.

Sana Contractor "Responsiveness of Health Systems to the Needs of Tribal Women in India: A Study of Women's Experience with Maternity Services in Odisha, India". Oral Presentation at the Fourth Global Symposium on Health Systems Research, Vancouver, Canada, November 14th – 18th 2016.

Surekha Dhelata "Bridging Divides for Better Health Care: Building Community Leaders Capacities in Innovative Use of Information Communication Technology to

Facilitate Communication Between Health Systems and Communities Enhancing Responsiveness'. Poster presentation at the Fourth Global Symposium on Health Systems Research, Vancouver, Canada, November 14th – 18th 2016.

http://www.copasah.net/uploads/1/2/6/4/12642634/copasah_at_fourth_global_symposium_gshsr_2016.pdf

E. Premdas Pinto 'Emerging Ethics Jurisprudence'. Oral Presentation presented at the Sixth National Bioethics Conference organised by FMES and IJME on the theme - 'Healing and Dying with Dignity: Ethical Issues in Palliative Care, End-of Life Care and Euthanasia' at Pune, India, January 12-14, 2017.

Abhijit Das, Sana Contractor and A. R. Nanda 'Coercive and Targeted Population Control Policies, Public Health Counter-Evidence and the Response of Courts to the Denial of Women's Right to Health Care. Oral Presentation on a Panel on Politics of Evidence and Health Care at the 4th LASSnet International Conference - Thinking with Evidence: Seeking Certainty, Making Truth, at India Habitat Centre, New Delhi, 10-12 December 2016.

E. Premdas Pinto, Surekha Daleta 'Shifting Policies in a Weakened Public Health System and Judicial Response to Denial of Maternal & Reproductive Rights to Health Care'. Oral Presentation on a Panel on Politics of Evidence and Health Care at the 4th LASSnet International Conference - Thinking with Evidence: Seeking Certainty, Making Truth, at India Habitat Centre, New Delhi, 10-12 December 2016.

E. Premdas Pinto and **Akhila Vasan** 'Doctored' Evidence to 'cul-de-sac' of Evidence: The Challenges in Fixing Accountability of Medical Doctors in Patient Rights Violations in the Private Health Care Sector. Oral Presentation on a Panel on Politics of Evidence and Health Care at the 4th LASSnet International Conference - Thinking with Evidence: Seeking Certainty, Making Truth, at India Habitat Centre, New Delhi, 10-12 December 2016.

INFORMATION MANAGEMENT

For the last few years information management and communication has been playing a crucial role in strengthening and transforming bottom-up participatory process to vertical and multi-layer approach in order to promote and strengthen social justice. To realize this, the organization has taken multiple innovative communication initiatives that integrated diffusion and participatory approaches to engage practitioners working with the deprived and marginalized community both at the local and global level. Multiple and multilingual accessible communication platforms like social media including Facebook, WhatsApp, Twitter, Blogs and You Tube were used to stimulate citizens on the issue of accountability and gender justice where networking and social campaign have a central role; community radio was effectively used to encourage dialogue among men and boys towards challenging the age old patriarchal social norms and websites were used as tools for repository of knowledge and updated information for strengthening social communication. ICT was extensively used this year by introducing video conferencing platform to

initiate Social Accountability Dialogue Series with a view to facilitate mutual learning among practitioners and accountability thinkers across the globe as well as grassroots practitioners who were empowered to use film-making as a tool for documentation to support community monitoring process.

Multiple online platforms:

The CHSJ team managed multiple online platforms and worked towards systematic dissemination of information for building and sharing knowledge, raising consciousness, creating consensus, receiving feedback and pushing for change. These included:

- COPASAH platform which included a website (copasah.net), a listserv, a blog, a twitter and an online newsletter (COPASAH Communiqué).
- Support for Reproductive and Sexual Health and Rights related work included supporting the Reproductive Health Observatory (rbservatory.net), a listserv, (ReproHealth India) as well preparing periodic aggregates for the Health News Update.
- eLearn-Health CBM (<http://www.copasah.org/e-learncbm>).

html), an interactive e-resource for grassroots human rights practitioners on health in Hindi.

- For networking on men and gender equality, the CHSJ team provided support to maintain the FEM website (femindia.net) as well as the MenEngage Delhi Facebook page.
- Multiple online platforms for EkSaath national campaign involving men and boys for gender justice to maintain link between campaign partners and SamantaSaathis (Gender Champions) included a website (<http://www.eksaahtcampaign.net/>), a listserv, a Facebook, a Twitter and multiple WhatsApp groups.
- Other online platforms that are being actively maintained are the website www.menengagedilli2014.net which showcases resources developed from the global symposium, platforms like the Facebook page MenEngage Delhi (<https://www.facebook.com/MenEngageDilli/>) and a Google group Menengage Connect which are bringing together the global community interested in the work with men and leading to a lot of sharing and learning.



- To create a deeper understanding and engagement with issues of men and masculinities in the South Asian region, the CHSJ team has developed and provided technical support to a four-week online course called “Understanding Masculinities - Engaging Men and Boys towards Gender Equality.”
- For the empowerment of marginalized communities in the city of Kolkata, the CHSJ team provided technical support in developing a website ‘<http://www.kolkatainitiatives.net/>

NEWSLETTERS

CHSJ supports the sharing of grounded evidence, information, good practices from the community on issues related to health governance and accountability with different groups at global, national and sub national level. The newsletters are:

COPASAH Communiqué: This is a quarterly newsletter and a repository of case stories, articles, reports, organisational profiles from the various regions of the globe in which the practitioners shared their experiences and learnings on social accountability mechanism. The newsletter is published electronically and in this period regional special issues were published covering case stories from Central Europe, Latin America and East Southern Africa.

Matrutva Swasthya Samvad: This is a quarterly newsletter published in Hindi, focusing on issues related to maternal health in Madhya Pradesh. It encourages partners and readers to highlight case stories from the field through community-based reporting.

STRENGTHENING INNOVATION IN THE USE OF ICT FOR BETTER HEALTH AND SOCIAL JUSTICE

Two innovative uses of ICT such as COPASAH global accountability dialogues series and community

radio programme in the hills of Uttarakhand were experimented successfully. Whereas ongoing ICT initiatives like training of COPASAH members in film-making for Social Accountability and the KishorVarta with new episodes of audio stories have entered into the second phase of ICT for better health and social justice. The initiatives included:

KumaonVaani: CHSJ reintroduced one of the old and popular medium like community radio in Kumaoni language with content support for 24 episodes audio drama ‘Apun Radio ApunBaat’ to engage men and boys in challenging gender discriminatory social norms in Uttarakhand.

Accountability Dialogue: With a view to transform and strengthen horizontal communication among the practitioners of accountability across the globe, CHSJ provided technical support in initiating the online web dialogue series called COPASAH Social Accountability Dialogue (CoPSAD) in March 2017. The series intends to enrich the field of social accountability with insights and experiences from the field of accountability as well to facilitate mutual learning among practitioners and accountability thinkers.

Skill Building on Film-Making and

Screening: In continuation to the secondary level of film-making workshops, the information management team had provided technical support to the grassroots practitioners in advance video editing. It was a three-day workshop where the practitioners sharpened their skills on different aspects of film-making such as writing script, recording narration, editing video evidence collected from the ground, producing the film and notably how to screen or present their films before a panel of audience. The details of the advanced video editing workshop can be accessed on: <https://www.youtube.com/watch?v=vxuPJs9MmA>

Kishor Varta: This year KishorVarta has entered into the second phase of audio story-telling to highlight

issues related to child rights, cyber safety, norms of son-preference, etc. The information management team has provided technical support to develop content for these stories. Now these stories are available through IVRS platform and are helping both adolescents and youth from rural Rajasthan to strengthen their understanding on gender, health and sexual and reproductive health in order to change unjust gender norms and reduce gender discrimination against girls and women in rural India.

Some of the publications that were brought out during the year include:

- Abhijit Das, Edward Premdas Pinto, Sana Contractor, ShreetiShakya and Mahendra Kumar ‘Engendered Accountability for Responsive Health Governance Intervention with Adivasi Men in Madhya Pradesh for Accountability in Maternal Health’
http://www.chsj.org/uploads/1/0/2/1/10215849/engendered_accountability_....pdf
- CHSJ’s Thoery of Change for Mobilising Men for Gender Justice in a Highly Patriarchal Setting
http://www.chsj.org/uploads/1/0/2/1/10215849/chsj_theory_of_change_for_mobilising_men_report_by_patrick_welsh.pdf
- Ground Realities of Beedi Workers in Tamil Nadu, Madhya Pradesh and West Bengal-Summary report of the field research on the conditions of beedi workers, industry accountability to legal compliances and social security of workers
http://www.chsj.org/uploads/1/0/2/1/10215849/tamil_nadu.pdf;
http://www.chsj.org/uploads/1/0/2/1/10215849/madhya_pradesh.pdf;
http://www.chsj.org/uploads/1/0/2/1/10215849/final_west_bengal.pdf
- Beedi Industry and Welfare of Workers in India
http://www.chsj.org/uploads/1/0/2/1/10215849/final_executive_summary.pdf

OPERATIONAL MECHANISMS

ORGANISATIONAL EFFECTIVENESS

The organisational development processes continued to shape CHSJ's institution policies and practice and also it helps to strengthen organizational communication. CHSJ's focus on capacity building continued, it took feedback from all staff members and also undertook staff appraisal.

A three-day retreat was organized at Sutra Campus, Solan, Himachal Pradesh between 8-10 June 2016 to deepening the understanding of politics behind CHSJ's intervention and strategies. The retreat had both mandate of perspective building and strategic planning which aiming at strengthening staff's understanding on issues related to marginalisation, equity, inter-sectionality and social justice. Moreover, it helped the organization to outline a communication strategy that will help in strengthening internal organization communication as well as fostering and enhancing relationship with allies and external stakeholders.

During this period the organization also mentored interns from various educational institutions from India and overseas.

Capacity Building

Staff members participated in

Fourth Global Symposium on Health Systems Research from 14-18 November 2016 in Vancouver, Canada.

Staff member was selected to be part of the "Emerging Voices for Global Health" cohort of 2016, as part of which the member attended a 12 day capacity building training in November in Vancouver, Canada. The member continues to be part of the Emerging Voices Alumni Network.

Following participation in two intensive residential workshops on child safeguarding, 'Ethical Considerations in Engaging with Children' organised by Oak Foundation in September in Kolkata and in Ranchi in November for civil society partners working with children, CHSJ held discussions in the organisation and reviewed and revised its existing Child Protection Policy.

Staff member participated in COPASAH South Asia Exchange and Strengthening Meeting from 4-6 December 2016 in Kathmandu, Nepal.

Staff members participated in Sixth National Bio-ethics Conference from 13-15 January 2017 in Pune, Maharashtra.

Staff members participated in Human Rights in Childbirth

Conference, from 2-5 February 2017 in Mumbai, Maharashtra.

Staff members participated in a five-day national level TOT on 'Gender Sensitization and Human Rights' organised in September by the Rajiv Gandhi National Institute of Youth Development in Chennai.

Staff members participated in a five-day ISABS (Indian Society of Applied Behavioural Sciences) workshop held in February in Delhi.

Committee for the Prevention of Sexual Harassment at the Work Place

In compliance with the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013, CHSJ has appointed an Internal Complaints committee with Sana Contractor as Presiding Officer, Shreeti Shakya and Mahendra Kumar as internal members and Madhubala and Runu Chakravarty as external members. In the given financial year, no complaints were received by the committee. As part of its activities, the committee has conducted staff trainings to orient staff on the law and forms of sexual harassment. An orientation to the organization's anti sexual harassment policy has also been included in routine orientation for staff and interns



PARTNERSHIPS AND COLLABORATIONS

The long-term sustainability of CHSJ's initiatives is only possible through relationships, partnerships and alliances. Some key partners of CHSJ are:

International

Community of Practitioners on Accountability and Social Action in Health (COPASAH); Institute for Development Studies, Sussex, UK; MenEngage South Asia Regional Alliance; MenEngage Global Alliance; Uganda National Health Users/Consumers Organization (UNHCO); Association for Emancipation Solidarity and Equality of Women (ESE) Macedonia; Transparency and Accountability International; Sonke Gender Justice, South Africa

National

Association for Social and Health Advancement, West Bengal; Astitva Samaj Vikas and Sanshodhan Sanstha, Maharashtra; Chotanagpur Sanskritik Sangh, Jharkhand; D Arul Selvi Community Based Rehabilitation, Tamil Nadu; Dharti Gramotthan Evam Sahbhagi Gramin Vikas Samiti, Morena, Madhya Pradesh; Engender Health, Uttar Pradesh; GHAROA, Assam; Gram Sudhar Samiti, Madhya Pradesh; Grameen Punarnirman Sansthan, Uttar Pradesh; Halo Medical Foundation, Maharashtra; Human Rights Law Network, New Delhi; Independent Television Service, New Delhi; ISD, Odisha; JAGAR, Maharashtra; JAGORI, New Delhi; Jeevika West Bengal; Kamdhenu, Maharashtra; Kolkata Rishta, West Bengal; MANJARI, Rajasthan; MARFAT, West Bengal; Nari Samta Manch, Maharashtra; Navjeevan Trust, Tamil Nadu; Parchiti West Bengal; PRADAN, New Delhi; Prerna Bharti, Jharkhand; SAHAJ, Society for Health Alternatives, Gujarat; SAHAYOG, Uttar Pradesh; Sahayogini, Jharkhand; SAMYAK, Maharashtra; SANGAT, Delhi; Sanwad, Maharashtra; Sathiya Welfare Society, Madhya Pradesh; SPARK, Jharkhand; Srijan Foundation, Jharkhand; Support for Advocacy and Training to Health Initiatives (SATHI), Maharashtra; SUTRA, Himachal Pradesh; SWAYAM, West Bengal; Tarun Chetna Sansthan, Uttar Pradesh; VIKALP, Rajasthan; Vimarsh, Uttara Khand; Yuva Gram Vikas Mandal, Maharashtra

Networks

Advisory Group on Community Action (AGCA), a standing committee in the NRHM, Ministry of Health and Family Welfare; Common Health; Forum to Engage Men (FEM); FEM Jharkhand; FEM Odisha; Healthwatch Forum; India Alliance for Child Rights; India Alliance for Gender Justice; Jan Adhikar Manch, Bihar;

Jan Swasthya Abhiyan; Mahila Swasthya Adhikar Manch, Uttar Pradesh; Maternal Health Rights Campaign (MHRC), Madhya Pradesh; Medico Friend Circle (MFC); Men's Action for Equity (MAE), Madhya Pradesh; Men's Action for Stopping Violence Against Women (MASVAW), National Campaign on Dalit Human Rights (NCDHR); One Billion Rising (OBR); Right to Food Campaign; Uttar Pradesh; National Alliance for Maternal Health and Human Rights (NAMHHR); Wada Na Todo Abhiyan; and many other state level organisations across India

Advisory Support

We would like to express our gratitude to the following individuals for their contributions and technical inputs in enhancing CHSJ's work during the year : Amitabh Behar; Amitrajit Saha; Anand Pawar; Anjali Sen; Enakshi Ganguly Thukral; Imrana Qadeer; Jashodhara Dasgupta; Jaya Velankar; Jerker Edström; Mira Shiva; Nandita Shah; Paul Divakar; Ramakant Rai; Ravi Verma; S Srinivasan; Sanjay Srivastava; Sanjeev Sridharan; Santosh Giri; Shib Shankar Dasgupta; Sonali Khan; Sundari Ravindran; Vrinda Grover

Donors:

Center for the Study of Equity and Governance in Health Systems (CEGSS), Guatemala; Embassy of Federal Republic of Germany; Ford Foundation, USA; John D. and Catherine T. MacArthur Foundation, USA; NarotamSekhsaria Foundation, Maharashtra; NASSCOM Foundation, Maharashtra; National Foundation of India, New Delhi; Oak Foundation, Switzerland; Reliance Foundation, Maharashtra; Sonke Gender Justice, South Africa; Swiss Aid, Switzerland; TIDES Foundation, USA; UNFPA, India; William and Flora Hewlett Foundation, USA

ANNEXURES

Annexure 1:

Human Resources Staff

CHSJ Staff as on 31st March 2017

Abhijit Das, Director
Ajay Kumar, Finance Manager
Ajay Lal, Programme Officer
Badar Uzmma, Programme Officer
Dheeraj Giri Goswami, Programme Associate
E Premdas Pinto, Research and Advocacy Director
Ishu Das, Account/ Office Assistant
Jagdish Lal, Programme Officer
Mahendra Kumar, Programme Manager
Priti Sisodia, Executive Assistant cum Relationship Manager
Rimjhim Jain, Programme Manager
Rudrakshina Banerjee, Programme Officer
Sambit Kumar Mohanty, Programme Manager
Sana Contractor, Programme Manager
Sandhya Gautam, Programme Manager
Satish Kumar Singh, Additional Director
Shreeti Shakya, Programme Officer
Surekha Dhaleta, Programme Officer
Sushil Kumar, Finance Assistant
Tulsi Manimuthu, Administrative Associate
Zohra Zaman, Programme Associate
Md. Alam, Driver

Consultants

Aapurv Jain; Anchita Ghatak; Devika Biswas; Ganesh Chandra Dey; Gautam Kumar Rai; Josefina Oraa; Kedar Prasad Rajak; Lavanya Devdas; Manish Singh Gaur; Mriganka Mondal; Nasuriddin Haidar Khan; Parvin Dhoni; Parvinder Kumar Ray; Pramod Kumar Chauhan; Priya John; Rajdev Charturvedi; Ramayan Yadav; Renu Khanna; Ruth V Vivek; Shishupal Yadav; Srinivashan Akhila Vasant Panchamukhi; Vinod Kumar; Joe john

Interns

Alejandra Lemus, Alka Rani, Chaitnya, Chitra Anand, Drishti, Ekta, Halima, Isha Vajpeyee, Jannet Vergis, Kristin Rolke, Michael Gillette, Nazia, Shenon, Shiwangi, Sidhi Mishra, Surbhi Shrivastava

Staff who left CHSJ during the year

Ahmad Faraz, Programme Associate
Deepak Kumar, Programme Associate
Shakti Suresh Jamdade, Programme Manager

Annexure 2:

CHSJ Board of Trustees

Abhijit Das

Managing Trustee and Director, CHSJ, New Delhi and Clinical Assistant Professor, Department of Global Health, University of Washington, Seattle (USA)

A. R. Nanda

Former Executive Director, Population Foundation of India; Former Secretary, Family Welfare, Ministry of Health and Family Welfare, Government of India

Renu Khanna

Public Health Professional

Subhash Mendhapurkar

Development Professional

Suneeta Dhar

Gender Specialist

Usha Rai

Senior Journalist and Communication Consultant

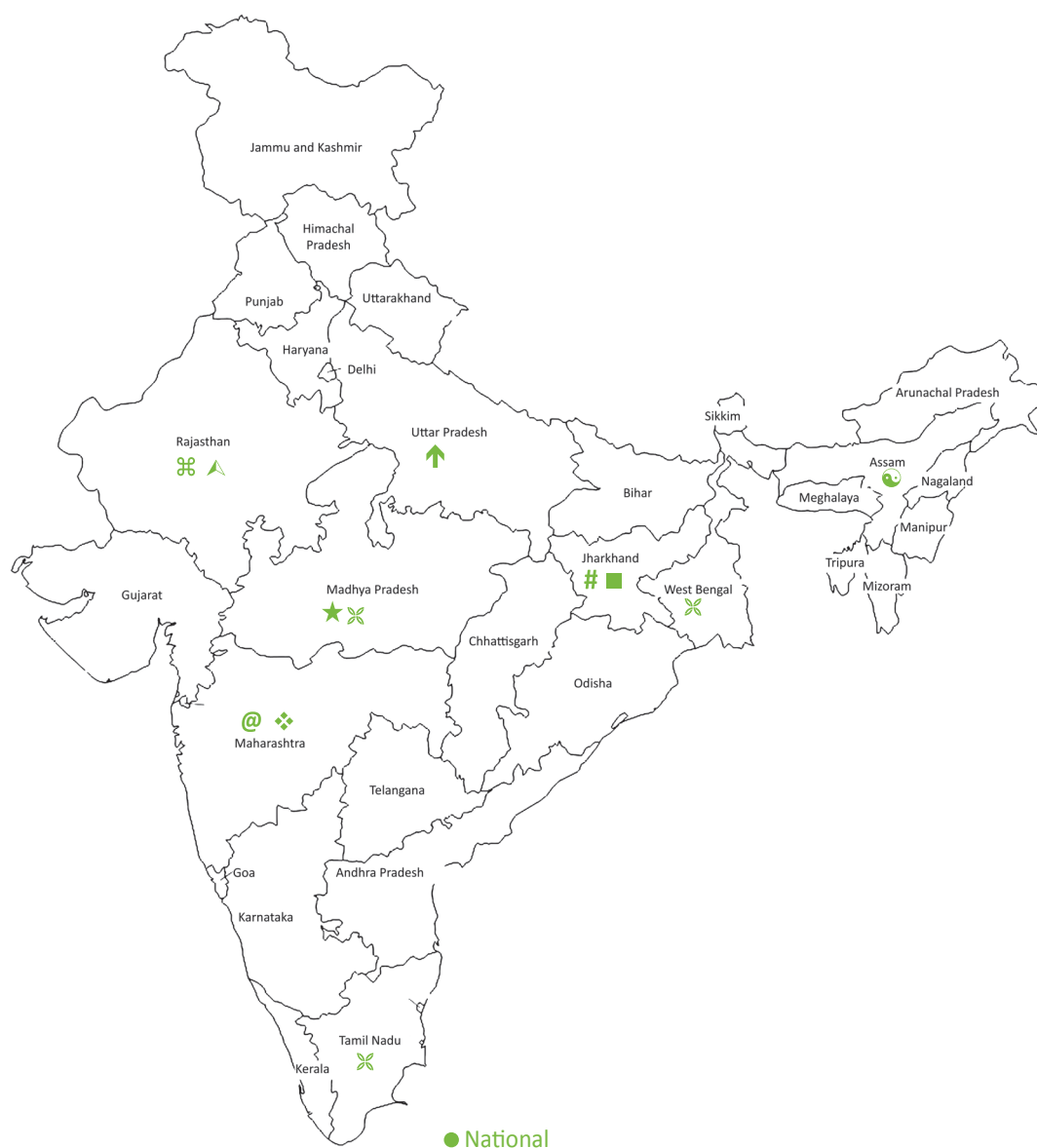
Vijay Kumar Aruldas

Development Sector Consultant

Annexure 3:

Distribution of CHSJ's activities and partnerships in different states

- ★ Consolidating the community accountability initiative for maternal health in Madhya Pradesh.
- Consolidating the Community of Practitioners in Accountability and Social Action in Health (COPASAH) as knowledge- generation and dissemination platform. (National)
- # Enabling men as responsible partners and caring fathers in West Bengal and Jharkhand.
- Engaging men and boys through community mobilisation and advocacy for gender equality (National)
- "EkSaath" A national campaign for promoting men's involvement for changing gender social norms
- Networking on men and gender equality. (National)
- Redeveloped 'eLearn-Health CBM' an interactive e-resource on community monitoring in health. (National)
- @ Repositioning family planning project, Maharashtra.
- ↑ Social audit for quality improvement in family planning services in Uttar Pradesh.
- Support to developing a platform for sharing resources on men and gender equality. (National)
- Support to One Billion Rising Campaign. (National)
- ✂ Working with young men and boys for introducing new gender related social norms in Rajasthan.
- ✂ Project on rights for Beedi Workers (Tamil Nadu, Madhya Pradesh, West Bengal)
- 🕒 Expanding agenda on masculinities and gender justice (North East)
- ❖ Develop support for women empowerment (Maharashtra)
- Breaking the silence-abuse of boys in state institutions in Jharkhand
- ▲ KishorVarta (Rajasthan)



Financial Summary 2016-2017

CENTRE FOR HEALTH AND SOCIAL JUSTICE (CHSJ), NEW DELHI
CONSOLIDATED RECEIPTS AND PAYMENT OF FOREIGN CONTRIBUTION & GENERAL ACCOUNT

FOR THE PERIOD 01ST APRIL 2016 TO 31ST MARCH 2017

PREVIOUS YEAR	RECEIPTS	CURRENT YEAR	PREVIOUS YEAR	PAYMENT	CURRENT YEAR
	OPENING BALANCE			FOREIGN GRANTS UTILIZED:	
671,546.46	Foreign Contribution (Cash & Bank)	12,643,032.62	18,731,307.39	(As per Receipts & Payments A/c.)	21,998,079.45
20,851,048.54	General (Cash & Bank)	15,042,309.97			
69,935.00	FC - Advances & Imprest (Net)	(3,084,805.00)			
195,741.30	General - Advances & Imprest (Net)	3,425,446.00			
	FOREIGN GRANTS			INDIAN GRANTS UTILIZED:	
27,159,435.55	(As per Receipts & Payments A/c)	33,206,156.87	13,395,402.67	(As per Receipts & Payments A/c.)	10,284,453.33
388,618.00	Bank Interest	833,278.00	3,110,106.00		3,566,598.00
	INDIAN GRANTS:			OTHER PROGRAMME A/C EXP:	
10,213,300.00	(As per Receipts & Payments A/c.)	5,727,631.00	33,102.00	As per Receipts & Payments A/c.	138,436.00
	OTHER PROGRAMME RECEIPTS:			FIXED ASSETS	
1,326,974.00	(As per Receipts & Payments A/c.)	1,910,733.00	173,542.19	(As per Receipts & Payments A/c.)	705,522.41
	OTHER RECEIPTS			OTHER EXPENSES	
2,582,844.99	(As per Receipts & Payments A/c.)	1,062,901.35		(As per Receipts & Payments A/c.)	134,500.00
10,000.00	Refund Security	90,000.00		Security Deposit	
				CLOSING BALANCE	
				(As per Receipts & Payments A/c)	
				Foreign Contribution (Cash & Bank) A/c.	21,327,695.04
				General (Cash & Bank) A/c.	11,893,961.58
				General - Advances & Imprest (Net)	535,550.00
				FC - Advances & Imprest (Net)	271,888.00
63,469,443.84	Total Rs.	70,856,683.81	63,469,443.84	Total Rs.	70,856,683.81

The schedules referred to above, including Accounting Policy Notes form an integral part of the financial statement

In terms of our even dated report Attached

For & on behalf of:

Centre For Health and Social Justice

Abhijit Das
Managing Trustee

Renu Khanna
Trustee

for Subhash Mittal & Associates

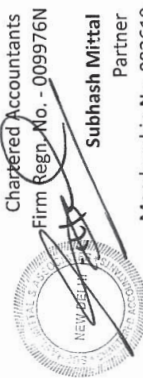
Chartered Accountants

Firm Regn. No. - 009976N

Subhash Mittal

Partner

Membership No. 083619



4 SEP 2017



CENTRE FOR HEALTH AND SOCIAL JUSTICE (CHSJ), NEW DELHI
CONSOLIDATED INCOME AND EXPENDITURE OF FOREIGN CONTRIBUTION & GENERAL ACCOUNT
FOR THE PERIOD 01ST APRIL 2016 TO 31ST MARCH 2017

PREVIOUS YEAR	EXPENDITURE		CURRENT YEAR	PREVIOUS YEAR	INCOME		CURRENT YEAR
	Trust				Trust		
	General Grants				Grants General (incl. Interest)		
12,176,753.00	Programme Expenses	8,869,077.33		10,213,300.00	Received During the year	5,727,631.00	
1,218,649.67	Administrative Expenses	1,415,376.00	10,284,453.33	7,738,925.00	Add : Unutilized as on 01/04/2016	4,556,822.33	
				(4,556,822.33)	Less : Unutilized as on 31/03/2017	-	10,284,453.33
	Other Programme				Other Programme		
3,069,602.00	Programme Expenses	2,619,962.00		1,326,974.00	Received During the year	1,910,733.00	
40,504.00	Administrative Expenses	946,636.00	3,566,598.00	5,376,906.27	Add : Unutilized as on 01/04/2016	3,593,774.27	
				(3,593,774.27)	Less : Unutilized as on 31/03/2017	-	5,504,507.27
	Trust Expenses				Misc. Income		
17,518.19	Kolkata Initiative Programme	159,636.00		1,403,197.00	Bank Interest	803,902.07	
156,024.00	Consultancy Fee	58,352.00		8,915.00	TDS Interest Received	19,781.00	
	Office Expenses	-			Consultancy	100,435.00	
	Office Rent	-			Registration Fees	18,064.00	
	CHSJ Salary	487,534.41	705,522.41	1,756.99	Other Income	-	
				8,100.00	Donation	-	
256,563.00	Depreciation	-	216,160.00	982,453.00	Project Contribution	-	
	Transfer to Revolving Fund - Material	-	120,719.00	178,423.00	Contribution for Vehicle	-	
					Income from training material	120,719.28	
1,950,000.00	Transfer to Reserve Fund-Programme	-	1,937,909.27		Depreciation transferred from Capital Reserve Fund	36,229.00	1,099,130.35
178,423.00	Transfer to Fixed assets Replacement Fund	-					
	FC				FC		
	Foreign Grant				Grants foreign (incl. Interest)		
16,907,022.97	Programme Expenses	19,794,612.63		27,190,753.55	Received During the year	33,249,696.87	
1,466,984.42	Administrative Expenses	2,203,466.82	21,998,079.45	741,481.46	Add : Unutilized as on 01/04/2016	9,558,227.62	
				(9,558,227.62)	Less : Unutilized as on 31/03/2017	20,809,845.04	21,998,079.45
	Other Administrative Exp. (FC)				Other Income		
9,000.00	Audit and Legal Fee	-			Bank Interest	153,909.00	
60,000.00	Consultancy Fee	-		102,289.00	Interest earned on Fixed Deposit	635,829.00	789,738.00
12,544.00	Maintenance and Repair	-		255,011.00	Depreciation transferred from Capital Fund	-	111,205.00
34,024.00	Office Expenses	-					
158,686.00	Office Rent	-					
3,388.00	Printing and Stationery	-					
77,278.00	Salary	-					
2,380.00	Travel	-					
	Depreciation	-	111,205.00				
	Transfer to General Reserve	-	789,738.00				
24,316.80	Excess of Income over Expenditure	-	56,728.94				
37,819,661.05	Total Rs.		39,787,113.40	37,819,661.05	Total Rs.		39,787,113.40

The schedules referred to above, including Accounting Policy Notes form an integral part of the financial statement

In terms of our even dated report Attached

For & on behalf of:
Centre For Health and Social Justice

 Abhijit Das
 Managing Trustee


 Renu Khanna
 Trustee



for Subhash Mittal & Associates
 Chartered Accountants
4 SEP 2017

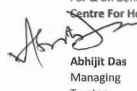
 Subhash Mittal
 Partner
 Membership No. 083619

CENTRE FOR HEALTH AND SOCIAL JUSTICE (CHSJ), NEW DELHI
CONSOLIDATED BALANCE SHEET OF FOREIGN CONTRIBUTION & GENERAL ACCOUNT
AS ON 31ST MARCH, 2017

PREVIOUS YEAR	LIABILITIES	Schedule	CURRENT YEAR	PREVIOUS YEAR	ASSETS	Schedule	CURRENT YEAR
5,000.00	CORPUS FUND(GEN A/c)		5,000.00		FIXED ASSETS:		
	CAPITAL FUND:			2,320,589.00	General Account	Sch-II	2,522,546.00
1,242,688.00	Capital Reserve			142,917.00	FC Account	Sch-V	858,563.00
142,917.00	General Account	1,269,980.00	1,505,192.00				3,381,109.00
	FC Account	235,212.00					
1,319,495.00	Depreciation Reserve				CURRENT ASSETS:		
	General Account	1,535,655.00			Security Deposit		
	FC Account	623,351.00	2,159,006.00		General Account		
					Balance Brought Forward		202,000.00
1,172,565.37	REVENUE RESERVE			212,000.00	Less : Security Refund		90,000.00
	Income & Expenditure A/c				Addition During the year		134,500.00
	General Account	1,229,294.31			FC Account		246,500.00
	FC Account	Nil	1,229,294.31		Loan & Advance		Nil
	General Reserve				General Account	Sch-I	590,146.00
7,150,000.00	Balance Brought Forward	9,100,000.00		(10,000.00)	FC Account	Sch-IV	271,888.00
1,950,000.00	Addition during the year	1,937,909.27		3,543,501.00	Bank Balances & Cash		
	FC Account	11,037,909.27		(3,084,805.00)	General Account		11,893,961.58
	Revolving Fund - Material	789,738.00	11,827,647.27	15,042,309.97	FC Account		21,327,695.04
	General Account	120,719.00		12,643,032.62			
	FC Account	Nil	120,719.00				
	RESTRICTED FUNDS:						
9,558,227.62	Foreign Grants	VI	20,809,845.04				
4,556,822.33	Indian Grants		20,809,845.04				
3,593,774.27	Other Programme						
	COMMITTED LIABILITIES						
118,055.00	General Account	Sch-I	54,596.00				
	FC Account		Nil	54,596.00			
30,809,544.59	Total Rs.		37,711,299.62	30,809,544.59	Total Rs.		37,711,299.62


The schedules referred to above, including Accounting Policy Notes form an integral part of the financial statement

In terms of our even dated report Attached

For & on behalf of:
Centre For Health and Social Justice

 Abhijit Das
 Managing Trustee


 Renu Khanna
 Trustee



for Subhash Mittal & Associates
 Chartered Accountants
 Firm Regn. No. 009976N
NEW DELHI

 Subhash Mittal
 Partner
 Membership No. 083619



Centre for Health and Social Justice

Basement of Young Women's Hostel No. 2,
Near Bank of India, Avenue 21, G Block, Saket, New Delhi- 110017,
Telephone: +91-11-26535203, +91-11-26511425, Fax: +91-11-26536041;
Email: chsj@chsj.org, Website: www.chsj.org

